	REIMBURSA		ıreau, or establishment)	+			PA	ID BY	
Voucher prep	ared at	.=							
Voucher prepared at					Cice 1411				
					76.23	DPD-el	759-59	ĺ	
To		T)	Payce)			]	COPY	0F2	
	(Ade	dress)	(City)	(State)		_			
No. and Date of Order	Date of Delivery	(Enter description, i	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)  Discount Terms  QUANT			UNIT PRICE		AMOUNT	
	or Service	schedule, and o			QUANTITY		Per	Doliars	С
		G I						, ,	
		Costs						\$7,763	5
					1				
PAYMENT:									
Complete  Partial									
Final		I lee con	atinuation sheet(s) if necessary	,					
Shipped from	t			rnment B/L No.			Total	\$7,763	- -
I certify that the a	bove bill is correct	t and just and that payme	ent has not been received.		ee must NO			, , , , ,	1
		(Sign original only)		Differen					-
7 /00 /	50								-   -
Date 1/22/	29 * 1	red when a like o	portificate is made by payee on attached bill	or bills)				7.763	-
Per		Title						-/, / e =	
Contract No.	1-101	Date	Reg. No.	D	ate	I	nvoice Rec'	1.	_
Pursuant to author	ity vested in me, I	certify that this account	is correct and proper for pay	ment.					
† Approved for \$			†		(Authoria	ad Cartiful	na Offices)		
Rv			SIGN Original t	itle					
y			ONLY	TUIC					
			D	)ate					
Title									
Title	THE REVERSE OF TH	IS FORM MUST BE EXECUTED W	HEN PURCHASES ARE MADE OR SER	VICES SECURED WITHOU	UT WRITTEN A	GREEMENT 1	N ANY FORM		

